CITY OF YORK PARKS AND RECREATION FAMILY AQUATIC CENTER RENTAL FORM



Rental Date:		one Number:						
					Splash Party:	Facility Rental:	Number of Patrons:	
					Swim Meet:	Set-up date:	Time:	_
Number of Teams:	Meet Coordinator:	Phone:						
Equipment Need & Amou	Int: Chairs Tables	Trash Cans						
Concessions	Sound System Mis	С						
Family Aquatic Contan	***Rental Fee is required at the	time of the reservation***						
<u>Family Aquatic Center</u> Saturday Splash Party (Zero Depth only, 10:30am-Noon)		\$150						
Facility Rental (2 hours immediately after pool closes)		\$400						
Swim Meet (\$50/hour)		\$50 x hrs						
		RENTAL TOTAL: \$						
<u>Cancellation Policy</u> Less than 14 days = NO RE	FUND							

RENTAL RULES

- 1. All Family Aquatic Center rules must be followed at all times during a rental
- 2. No alcoholic beverages, glass containers or outside food allowed in the facility
- 3. Floaties must be approved by CPO in charge of the event
- 5. Swim wear only, no shorts, cut-offs or t-shirts allowed
- 6. City of York is not responsible for lost, stolen or broken items
- 7. Family Aquatic Center reserves the right to cancel the rental due to weather.

CITY OF YORK RENTAL AGREEMENT

The City of York gives the Renter the right to use the described premises in consideration of the rental charge specified upon the following conditions:

1. The Renter shall now use the premises in violation of any Federal or State Law, City Ordinance or Fire regulations, and shall pay charges for special security if some are deemed necessary by the City of York.

2. The Renter shall pay for any damage or breakage to the building or property therein that occurs as a result of negligence or misuse of said premises by the Renter

3. The Renter shall leave the premises in a clean and orderly condition (garbage and other debris picked up and in receptacles) or the City reserves the right to withholds refund of deposits.

4. All tables and chairs must be taken down by the Renter immediately following the event.

5. The City reserves the right to rent all available facilities during any given rental or event.

6. The Renter shall hold the City of York harmless form all liability for injury or death, or loss of or damage to, any person or property that occurs during or as a result of, the use of facilities by the Renter, and shall indemnify the City for all expenses it may incur as a result of claim or demand by anyone growing out of the use of said facility by the Renter.

7. The City reserves the right to withhold refund of deposits and establish larger deposits based on events.

SWIM MEET ADDITIONAL AGREEMENTS

1. Swim team must provide a Certified Pool Operator at all times during practices and meets. Pool chemical readings are to be accurately checked and recorded before every practice and meet by the swim team's CPO.

2. During swim meets, locker rooms and pool deck will be supervised by swim team staff

3. **Insurance:** Any party agreeing to use the facilities provided by the City of York shall provide the following insurance. All leagues shall secure and maintain at no expense to the City of York, a comprehensive general liability policy issued by one or more companies authorized to do business in the State of Nebraska. Under such insurance: 1. City of York shall be identified as an additional named insured 2. Liability limits shall be a minimum of \$1,000,000 per occurrence, combined single limit for personal injury and property damage, the term of such coverage to coincide with the dates of the contract. The certificate of Insurance Verification shall be on file with the City of York's Parks and Recreation Department prior to any games being played under this contact.

The undersigned agrees to the terms and conditions set forth above and the Parks and Recreation Department acknowledges receipt of payment of rental charges as specified and dated on agreement.

YPR Representative sign	Date:			
Renter signature:			_ Date:	
Office Use Only: Rental Fee accepted on:	with an amount of:	. Payment Type:		

Recreation Coordinator informed on: ______. Staff filled: ______